# The Journal

Vol. 24

No. 15

www.bethesda.med.navy.mil

April 12, 2012

## First Lady Michelle Obama Visits Fisher House



"It is always one of my favorite things to do, to come to the Fisher House," said First Lady Michelle Obama during her recent visit to Naval Support Activity Bethesda Fisher House No. 4, pictured here with 3-year-old Eun White. "This house is a home away from home for so many of our military families. The work they do here is amazing," she said. To kick off the Month of the Military Child, Obama took part in a pre-Easter celebration, spending time with wounded veterans and their families making arts and crafts and signing autographs.

## **Organ Donation Awareness Month:**

### Rebirth of old technique gives kidney transplant patients new lease on life

#### By Sharon Renee Taylor Journal staff writer

It was midnight when retired Navy Petty Officer Second Class Joyce Brillantes received the call in Chula Vista, Calif., that a kidney was waiting for her at Walter Reed National Military Medical Center (WRNMMC) in Bethesda, Md. She had spent more than a year on the transplant list and administered peritoneal dialysis infusions to herself at home four times a day to clean her blood like her kidneys should.

Brillantes scrambled to make flight arrangements. Airline delays caused the 30-year-old to miss a connecting flight by 18 minutes and forced her to wait seven hours in a Salt Lake City, Utah airport.



Fred Gage, far left, a clinical research coordinator at WRNMMC

instructs organ recovery team members Sgt. Candice Westbrook, Caroline Acker, Sgt. Zachary Johnson and Spc. Michael Douglas on See DONOR page 6 how to use the new kidney perfusion machine, center.

## **New Exercise Class** Offers Fun, Fitness with Spring-Loaded Boots

By Mass Communication Specialist Seaman **Dion Dawson** Journal staff writer

A new class has jumped out in front as one of the most popular and sought-after fitness regimens offered by Naval Support Activity Bethesda's (NSAB) Morale, Welfare and Recreation (MWR) Fitness Center.

"Kangoo is an assisted cardio training class using special springloaded boots that were developed to take impact out of movements on the joints," said Devon Smith, MWR group fitness coordinator. Smith has been involved with the class since she began working at NSAB six months ago.

Each class averages 15 people, with five classes offered each week.

You start off the class with three to five minutes of no jumping, nonimpact moves. These [moves] consist of stepping to the front, back and side to side. We start with feet first, then add arms to increase the heart rate. After that, the next 40 minutes are movements that you can add propulsion. The movements vary from class to class. Here we try to go through the class doing one move at a time so that the participants won't have to think so much.

"Next is the cool down. This is where we get your heart rate back down and begin to end the class. The class ends with more nonpropulsion movements. We are on the floor doing core movements involving the hips and abdominals, while finishing up stretching with-out the boots," said Smith.

She said it's hard to stand up on the boots because they are curved, which requires engaging your core muscles immediately in order to balance yourself.

"The boots are intimidating when you first see them and use them because you are six inches higher off the ground and it's unstable when you stand still in one place. Once you put them on and start moving around, you see how

## **Commander's Column**

I hope you are aware by now that April is Sexual Assault Awareness Month. The overarching theme for the month is "Hurts One, Affects All" and in that light, I also hope you believe that not only is prevention of sexual assault is everyone's responsibility, but it is very likely that someone you work with or know per-

sonally has been sexually assaulted. All of us are affected as well as have a role to play.

First and foremost, supporting the sexual assault survivor and the trauma they have suffered should be the focus of all initial activity. Be supportive. Be THERE for them as you are able. Longer term, there is often a fundamental change in the way they look at things after an assault. Someone who has previously been open and friendly can become very guarded. It's easy for them to lose faith in a system that may have failed them and it's harder to trust those around them.

As a friend or coworker of the survivor, you may find yourself wondering if they could have done more to prevent the assault from happening. This can affect unit cohesion, morale and its impact on the work environment can tear a unit apart. This is especially true given the alarming fact that statistically, sexual assaults are often committed by someone who knows the person.

When someone suffers a sexual assault, there are very concrete losses in terms of time, unit cohesion, money spent investigating and prosecuting (which we WILL



do) and our reputation as an institution. cording to independent polling, today the armed forces consistently rank near the top of any list of public trust, but it doesn't take more than a few incidents change that.

If an assault happens in my unit, as a com-

mander, I would feel I've let that person down. I've let their family down, too, and ultimately I have failed my unit in some way because prevention IS everyone's duty and communicating that message starts with me.

This is going to sound a bit over the top, but we are an all volunteer service and everyone wearing the uniform today has raised their hand and said they were willing to do the hard thing, to do what only a small percentage of Americans do: to serve their country in the United States Armed Forces. Some of these brave volunteers are attacked by fellow service members. This is a betrayal of all of our core values.

Don't let yourself or your shipmates become part of that "All." Look out for them, look at the situations you find yourself in and ask yourself if something seems a little off. Don't become someone who feels like they could have, would have, should have done something. "All" doesn't just mean everyone is affected, "All" also means that everyone can make a difference.

Capt. Frederick Kass Commanding Officer Naval Support Activity Bethesda

#### **Bethesda Notebook**

Youth Float Party & Ice Cream Social

In observance of the Month of the Military Child, Naval Support Activity Bethesda and Morale, Welfare & Recreation Child and Youth Programs will host a Float Party & Ice Cream Social for youth and their families on Saturday, 9 a.m. - 2 p.m. at the pool in Building 17. Children must be accompanied by adults. For more information, call Daniel Dunham at (301) 295-7849 or Fleet and Family Services at (301) 319-4087.

#### Youth Health & Fitness Fair

Naval Support Activity Bethesda and Fleet and Family Services will host a Youth Health and Fitness Fair on Saturday, April 21, 9 a.m. - 2 p.m. in the gymnasium in Building 17. The event will include food, games, giveaways and special guests: Washington Redskins Cheerleaders. Come dressed to move! For more information, call (301) 319-4087, or visit fisc@med.navy.mil.

National Research Competition

On Monday the Bailey K. Ashford research award competition will take place in the Clark Auditorium 8 a.m. - 2:30 p.m. This competition is for graduating residents or fellows in the Graduate Medical Education and National Capital Consortium presenting their research done during their program. On Wednesday, the Robert A. Phillips research award competition will be held in the Memorial Auditorium, 8 a.m. - 5 p.m. This competition is open to any staff/fellow or resident presenting their ongoing research project. The winner from this competition goes on to the Navy-wide competition.

#### **DAISY Award Nomination**

The first DAISY Award Recognition Ceremony for extraordinary nursing team members will be May 7, 11 a.m. in Memorial Auditorium. The DAISY Award is for NPs, RNs, LPNs, NAs, Corpsmen/Medics, who have gone above and beyond in giving extraordinary care to patients. Patients, family members and staff are encouraged to submit nominations now through Wednesday, either by calling the DAISY line at (301) 295-4920 (choose option #2) or by calling Christie Ferguson at (301) 319-4148 or Joan Loepker-Duncan at (301) 319-4617.

Patient Family Center Care Survey

The Walter Reed National Military Medical Center Patient Family Centered Care (PFCC) Command Committee is conducting a hospital-wide survey to assess staff understanding of PFCC principles and their incorporation into daily practices. The survey runs through April 21, is available on the WRNMMC intranet and should take approximately seven minutes to complete.

Published by offset every Thursday by Comprint Military Publications, 9030 Comprint Court, Gaithersburg, Md. 20877, a private firm in no way connected with the U.S. Navy, under exclusive written contract with the Walter Reed National Military Medical Center, Bethesda, Md. This

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Center, Bethesda, Md. News copy should be submitted to the Public Affairs Office, Bldg. 1, 11th Floor, by noon one week preceding the desired publication date. News items are welcomed from all WRN-MMC complex sources. Inquiries about news copy will be answered by calling (301) 295-5727. Commercial advertising should be placed with the publisher by telephoning (301) 921-2800. Publisher's advertising offices are located at 9030 Comprint Court, Gaithersburg, Md. 20877. Classified ads can be placed by calling (301) 670-2505.

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## **WRNMMC Honors Junior Officer, Civilians of the Year**

By Bernard S. Little Journal staff writer

Junior Officer and Civilians of the Year for 2011 were honored during a ceremony April 4 at Walter Reed National Military Medical Center (WRNMMC).

Rear Adm. Alton L. Stocks, WRNMMC commander, presented Army Capt. Brian M. Cohee, Shanita A. Goodman and Rachel E. Jacobs with the Junior Officer of the Year (JOY), Junior Civilian of the Year (COY) and Senior COY awards respectively.

Stocks commended the entire WRNMMC staff for the medical center's successful Joint Commission survey last month. "Well done. There were zero direct-patient findings. Considering everything you've gone through this past year [with integration], it is unprecedented;

"I used that as lead-in because recognizing the junior officer of the year, and junior and senior civilians of the year is another example of how [well] we are working together side-by-side," Stocks added.

"I read all the packages of the nominees, and the [selection] committee had a tough job," Stocks continued. "The common thread I see among all the individuals that make them successful is they care about [others]. That's what shines through." He said caring for others is also what makes WRNMMC the "Nation's Medical Center" and a world-class institution.

The honorees received awards and letters of commendation signed by Stocks.

Cohee, chief of residents, General Internal Medicine at WRNMMC, is credited with "planning and implementing the schedule for the newly merged residency program during integration," states the citation he earned for the Navy and Marine



Rachel E. Jacobs (left), Capt. Brian M. Cohee and Shanita A. Goodman display the awards they earned for Walter Reed National Military Medical Center's Senior Civilian of the Year, Junior Officer of the Year and Junior Civilian of the Year for 2011 respectively. The three, along with other nominees for the awards, were honored during a ceremony on April 4 in Laurel Clark Memorial Auditorium.

Corps Commendation Medal as junior officer of the year.

"Additionally, he simultaneously coordinated educational enhancements, managed unparalleled program expansion, and guided more than 70 trainees, creating the largest graduate medical education training program in the National Capital Area," the citation stated.

After receiving the award from Stocks, Cohee thanked the residents. He said even though there have been a lot of changes during the year, "the residents have been amazing, responded well to changes, and made the job easy."

Goodman was also recognized for the services she helps provide to WRNMMC patients, and credits those with whom she works for her accomplishments. The outpatient pharmacy technician supervisor was honored for "exceptionally directing people, managing resources and executing complex operations" of the pharmacy, resulting in her team filling over 226,876 prescriptions for active duty, retirees and family members, according to the letter of commendation she received. "She has been recognized by staff and patients for her personal involvement, critical thinking and focus on patient-centered care," the letter stated. "Additionally, she epitomizes the pharmacy department's philosophy of striving to improve pharmaceutical care by providing expert services and innovative solutions."

"The pharmacy is one of the busiest departments in the hospital," Goodman said in thanking her staff, adding that "no matter what happens, they are always there for me. They will change their schedules or stay later; thank [you] every-

See AWARD page 8

## Hospital Cancer Program Commended

By Bernard S. Little Journal staff writer

Walter Reed National Military Medical Center (WRNMMC) completed a successful on-site review of its oncology program by the American College of Surgeons Commission on Cancer (CoC) on March 29.

"The importance of this survey is that this is our first since integration," said Navy Capt. Ralph C. Jones, Cancer Committee Chair at WRNMMC. "Overall, this couldn't have gone any better."

The CoC was established by the American College of Surgeons in 1922 to ensure quality, multidiscipli-

nary and comprehensive care delivery in health care settings, according to CoC officials. Its membership is composed of surgeons representing the American College of Surgeons, or representatives from the 49 national, professional organizations or member organizations, affiliated with the CoC.

"The Commission on Cancer accreditation is the standard all great programs seek," Jones explained. "In the U.S. and territories, 25 percent of hospitals are CoC approved, and nearly 80 percent of all U.S. cancers are treated in CoC approved hospi-

The CoC survey is triennial, and

the former National Naval Medical Center (NNMC) was approved with commendation by the CoC on June 10, 2009. The former Walter Reed Army Medical Center's (WRAMC) oncology program was also an approved program with commendation, Jones added.

"WRAMC stood down their cancer program in April 2011. NNMC stood down their cancer program in September 2011, [and] WRNMMC stood up a new cancer committee in October 2011," he continued.

Jones further explained that the CoC is "dedicated to reducing the morbidity and mortality of cancer

See CANCER page 5

## Tips for Teaching Money Management to Kids

Brian Pampuro, AFC **Personal Financial Manager** Fleet and Family Support Center Bethesda

One of the best gifts that a parent can give their child to help them succeed in life is the ability to save and manage money smartly. April is the Month of the Military Child, so there is no better time than now to share my thoughts on the topic.

Children will be best prepared to deal with life's challenges if they're raised in a happy and healthy home. However, even some of the most grounded people do not always make the best financial decisions.

It's important to understand that poor money management decisions are not the result of poor parenting, sub-level intelligence or lack of scholastic accomplishment. Bad financial decisions are made because people simply do not know how to manage money and never have had the opportunity to learn. Some school systems are now offering basic personal finance classes to junior high and high school students, but is that enough? Fortunately, there are many tools parents can use to teach their children how to manage mon-

Providing a monthly allowance can be a great method for giving kids hands-on experience managing money so long as it's not used as a means to get children to perform household tasks - children should learn to contribute to the household without expectation of monetary reward.

Here are six more suggestions:

1. Match your children's savings dollar for dollar, quarter for dollar or whatever comfortably fits your budget. Who doesn't like free money? It may be a small cost to you, but the saving habits you are instilling now will be a great return on your investment later on in your child's life.

2. Give your kids interest on their savings. You can customize the interest rate so that their account can grow at a faster rate. This is another example of "free" money and over time, will introduce your child to the power of compound interest.

3. A good way to help children understand compound interest is by allowing them to "see" their money grow visually using a chart or spread sheet. Your bank or credit union might offer financial literacy programs for children, or you can use an online savings program like www.smartypig.com/ or www.feed thepig.org/.

4. Put your child in charge of buying their own "stuff" Candy, video games,

THE THE PROPERTY PAGE &

## Patient Safety a Priority at WRNMMC

By Mass Communication Specialist Seaman **Dion Dawson NSAB Public Affairs** staff writer

According to the U.S. Department of Health and Human Services, approximately one in 10 patients are harmed while receiving hospital care because of errors or adverse events. At the Walter Reed National Military Medical Center (WRNMMC), outstanding patient-centered care, comprehensive care and patient safety education is the daily mission of the

"Patient safety is the reason why my department exists," said Susan Kinzel, a patient safety specialist and registered nurse with the patient safety department. "Hospitals exist to provide care for injuries in a safe environment and ensure that what we do is the right thing every single time. Patient safety provides education, information, assistance in reviews and assessments and training. A lot of times we have to ask the hard questions - 'is this process right? Can we improve the process? And can we ensure the patient is safe before doing this new process?' If a patient is harmed during a process at the hospital, it is our job to figure out how it happened and make sure it never happens again," she said.

WRNMMC has continually scored high in measurements of overall exhere at WRNMMC. In essence, we are able to see how well we are doing our job," says Kinzel.

Kinzel said she loves having the opportunity to improve the patient care because she can work with the direct-care personnel, assisting them in a supporting role and helping them

data in the patient data reporting system, an electronic system used to report incidents. At the end of the month, data is reviewed and made into charts, which helps illustrate any trends that may have developed.

"When I am looking at the data and I see improvements in areas that may have been an issue in the past, it makes me feel really good," said Dana Ellis-Darnes, a patient safety specialist with the patient safety department. She added that when individual clinics or departments come up with ways the hospital can take better care of its patients, everyone gets involved in making the hospital safer.

"We have classes and training for our patient safety advisors to take back to their clinics and wards to teach to their staff. We have been teaching our medical staff on how the safety goals affect our day-to-day business and how we can continuously improve," said Ellis-Darnes. "Our biggest tool for patient safety is education, and education is better when everyone participates," she said.

To learn more about patient safety, contact Ellis-Darnes or Kinzel at the patient safety office by calling: (301) 295-6236.

#### "Our biggest tool for patient safety is education."

Dana Ellis-Darnes, patient safety specialist

cellence and patient satisfaction. WRNMMC's reputation for excellence is reflected in the superior ratings consistently received from the Joint Commission on the Accreditation of Healthcare Organizations, which evaluates and accredits over 17,000 health care organizations and programs in the U.S.

"The Joint Commission assisted us in knowing how well we have been educating our staff on the required national patient safety goals. That is a huge part of the safety program

with their decision-making.

"We take the information we have and we provide it to the people who provide the care. We set standards and work every day to meet and exceed those standards," said Kinzel. She explained that the high turnover of patients and staff at a military hospital like WRNMMC can create challenges.

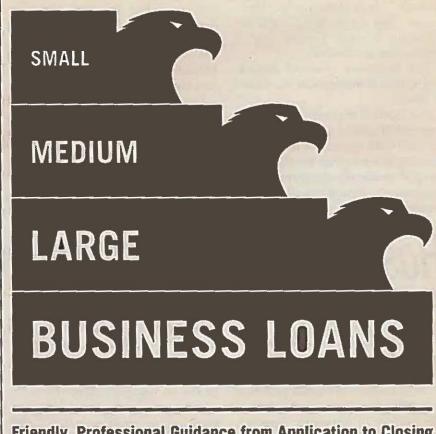
With this being a military hospital, it's a continuous education process because we always have people leaving and arriving. The responsibility doesn't stop just because a person transferred," she said.

Patient safety specialists review



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### CANCER

#### Continued from 3

through education, standard setting and the monitoring of quality care."

Dr. Frederick L. Greene, a CoC surveyor since 1997, spent all of last March 29 reviewing the WRNMMC oncology program. A general surgeon, Greene is a past chair of the CoC and American Joint Committee on Cancer. He reviewed WRN-MMC's cancer program's institutional and programmatic resources; cancer committee leadership; cancer data management and registry operations; clinical management; research; community outreach; professional education and staff support and quality improvement. He also evaluated the program's inpatient and outpatient cancer services.

"This is a marvelous facility and we should all be proud of it," Greene said. "I'm especially proud of it being former military and the job that this institution is doing in cancer care. It's a pleasure and I'm proud to



A surveyor with the Commission on Cancer, Dr. Frederick L. Greene (seated center) with some of the staff of Walter Reed National Military Medical Center's (WRNMMC) oncology program, said he's proud of WRNMMC's efforts in cancer care. Greene conducted an on-site review of the program March 29.

have this as part of our Commission on Cancer as one of our 1.500 hospitals."

Greene added that all areas on the WRNMMC's oncology program "stood out" during the on-site review, but the registry "stands out as an excellent example of what a registry should be, especially in the fact that now two hospital have joined to create this registry. The attitude and enthusiasm of the cancer committee really stands out to me." he added.

Jones also commended the pathology section.

"Of the charts Dr. Greene pulled and reviewed, we were 100 percent on requirements for registry and pathology," Jones said.

Jones and JoAnna Kruse, manager of Cancer Registry at WRNMMC, explained that much of the survey was done online prior to Greene's on-site review.

"Basically, all the documentation for the 36 accreditation standards had to be compiled and entered into the survey application record," Kruse said, adding that supporting documents pertaining to each standard also needed to be uploaded into the system. "It covers all three years and is quite indepth. In the past, we created binders for each year, but now it's all done via the website."

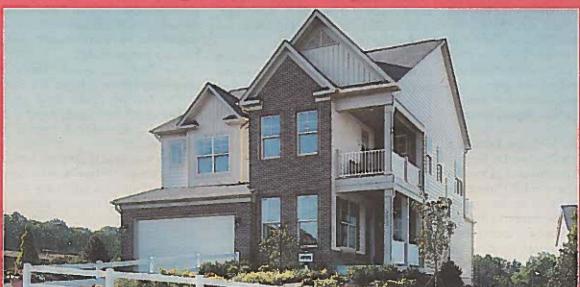
Jones added that the WRNMMC oncology program is "gold" in all areas and has met criteria for commendation in all areas achievable.

"There is a special category of 'outstanding' that only 10 percent of the programs receive," Jones continued. "This is especially significant as academic programs like ours represent only a few in the outstanding category, since it is the toughest."

Jones said final results of the survey won't be revealed for three or four weeks, "but overall, this couldn't have gone any better."

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### DONOR

#### **Continued from 1**

"It was nerve-wracking," Brillantes said.

A phone call to Army Sgt. Candice Westbrook in the transplant services department at the medical center assured her it would be okay. The team that would perform the life saving surgery was waiting for her in Bethesda, and her kidney was waiting, too — on a kidney perfusion machine, a first for WRNMMC.

Kidney perfusion places a donor organ in a system, which preserves kidneys outside of the donor's body until they are transplanted. The perfusion process enables doctors to ensure the viability of the donor kidney, energize the kidney as it waits on the machine, and buys time for the recipient and surgeons to prepare for transplant surgery.

The kidney Brillantes received spent almost 17 hours on the perfusion machine and began working immediately after it was transplanted on Jan. 30 — not the case for some kidneys that don't receive perfusion on the machine. Commonly kept on "ice," kidneys preserved in static cold storage must "unthaw" from this static or suspended state, and may take up to three months to begin functioning normally, requiring some kidney transplant patients to continue dialysis until the kidneys can work on their own. Brillantes' transplanted



Courtesy phot

Joyce Brillantes walks her 3year-old chihuahua beagle, Luie, in Chula Vista, Calif. Surgeons at Walter Reed National Military Medical Center in Bethesda, Md. performed a kidney transplant on the retired Navy Petty Officer 2nd Class after the donated organ spent 17 hours on a perfusion machine waiting for Brillantes to arrive at WRNMMC.

#### **Organ Donation Facts**

· 1 organ donor can save up to eight lives

· Approximately 18 people will die each day waiting for an organ

• 113,801 people are waiting for an organ

 The number of people waiting for an organ could fill a large football stadium twice over

• In 2007 there were almost 2.5 million deaths in the U.S.

 Approximately 100 million people in the U.S. are signed up to be deports

For more information on becoming a donor, visit: http://www.organ-donor.gov/becomingdonor/index.html

Data from organdonor.gov, opin.transplant.hrsa.gov, and Organ Procurement and Transplantation Network/Scientific Registry of Transplant Recipients Annual Report.

kidney was stored outside of the donor's body for about seven hours before it was placed on the perfusion machine, also called a pump, for another 16 hours — nearly 24 hours of organ preservation before surgery.

"When you get over about the 24-hour period of storage, you have more of problems with the kidney functioning right away," explained transplant surgeon, Army Lt. Col. Edward Falta, chief Transplant Services at WRN-MMC. "The kidney perfusion machine was key in the success of our patient."

#### New, Again

Clinical Research Coordinator Fred Gage and his team in the new kidney perfusion lab at WRNMMC resurrected a technique more than four decades old to give retirees, active duty service members and their beneficiaries a new lease on life.

Gage, who has worked in the field for 30 years, began assembling resources for the kidney perfusion lab in October 2011, soon after the transplant programs at the former Walter Reed Army Medical Center and former National Naval Medical Center integrated when the hospitals joined to form WRNMMC in August 2011. Staffers there performed the first kidney perfusion in the new lab Jan. 30, for Brilliantes' transplant, and a second Feb. 15 for another patient.

The technique, honed over the last 40 years, will enable WRNMMC, the only Department of Defense (DoD) military treatment facility that performs organ transplants, to move more patients off the waiting list, allow more military families to donate organs to loved ones and further organ preservation research.

Human kidney perfusion became a reality August 1967, when Dr. Folkert O. Belzer placed a recovered kidney on a perfusion machine in his University of California, San Francisco laboratory. The organ was transplanted in a recipient 17 hours after preservation efforts were initiated and began working immediately, according to the International Society for Organ Preservation.

Some civilian hospitals chose to abandon the kidney perfusion technique beginning in the 1980s, as air transportation costs began to climb, according to Gage. He explained that the organ recovery program at WRNMMC can opt to fly commercial or hop a military flight, cutting costs.

Finding trained personnel to perform kidney perfusion is also a challenge for transplant programs. Gage began training members of the WRN-MMC organ recovery team in September 2011.

"It's an older technology. It's been around but it's fallen away for several reasons: more so economical and logistical, but we brought it back to life here at Bethesda because of our situation, our travel times that [are] involved with both our patients and our kidneys," Falta said.

DoD transplant patients travel from as far away as Landstuhl, Germany, to Bethesda, for the life-saving surgery at WRNMMC. "The furthest kidney we've brought in was [from] Hawaii," Gage said.

Using the perfusion machine, organs can be sustained up to 80 hours after recovery from the donor, remain viable, and often begin working immediately after transplant to the recipient.

Whittled down in size from Belzer's 4-feet wide, 8-feet long apparatus that ran on two, 12-volt car batteries in 1967, the portable kidney perfusion machine Gage and his team use to recover organs is smaller than some suitcases, approximately 18 inches by 24 inches and weighs about 35 pounds. Gage's kidney pump is small enough to fit in a passenger seat on an airplane.

"It's portable to the point that it has two motorcycle batteries in it so it has eight hours of travel time," said Gage, who explained extra batteries are packed for longer distances.

A trip on a plane carrying Gage and a kidney in the perfusion machine could mean a shorter flight for other passengers. "They'll give you a straight flight if the pilot will declare it a life flight," he said. "And they will even clear the runways when you're landing so that you're first to land."

#### Benefits Now, Future Hopes

Gage said the kidney perfusion machine allows his team to evaluate, potentially resuscitate the kidneys and fine tune them using an adenosine triphosphate substrate, a modified sugar module, to energize the organ's cells, so that when the kidneys are transplanted they'll receive normal blood flow and begin functioning immediately. "You're including different additives in there. The kidney stores all that up," he explained. The process increases the chance that the transplanted kidney will work, and begin

working sooner.

"It allows us the opportunity to service our military brothers and sisters more effectively," Gage added.

Surgeons at WRNMMC have performed 18 kidney transplants since the two hospitals integrated - the first within a week of moving the WRAMC department to Bethesda. All DoD transplants were performed at WRAMC prior to the move. The WRAMC transplant service performed an average 30 kidney transplants per year, according to Transplant Coordinator Caroline Acker. She said about 100 or more of the hospital's DoD and VA patients await kidney transplants. The WRNMMC transplant service achieved a clinical score of 100 percent during a recent review by the United Network of Organ Sharing. Participation in a nationwide kidney swap chain is slated for the hospital later this year.

#### **New Life**

For service members like Brillantes who once lived her life around the dialysis she needed 28 times per week, the advances in transplant surgery and kidney perfusion at WRNMMC offer new opportunities, too.

"I'm feeling great," she said, two months after receiving her new kidney.

Brillantes said her energy is up and she has refurned to walking her three-year-old chiquaqua/beagle Luie — up to more than two miles, recently. And her appetite has returned: before her transplant, Brillantes said she ate like a bird, with restrictions on what she could eat. On the third day after her operation, she ordered shrimp pasta in the ICU.

"Let's say I demolished it," Brillantes said.

The swimmer looks forward to laps in the pool once again, and travelling abroad to visit relatives in the Philippines and Australia. For now, she's returned to online coursework in health administration, but Brillantes hopes to one day become a nurse for a transplant team, dialysis unit or nephrology department. She thinks it would be an inspiration to her patients to see her healthy and working.

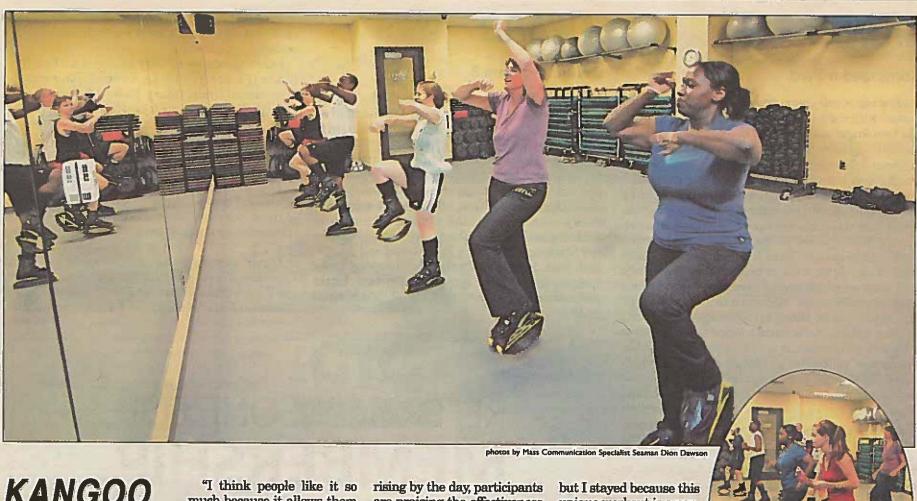
"So they can believe there is a chance and there is hope," she said.

The former Sailor said all she knows about her organ donor is that she was a 43-year-old woman, who perished.

"She was able to give me new life," said Brillantes, who elected to become an organ donor herself at age 17 when she earned her driver's license, not knowing she would need an organ nearly 15 years later after she was diagnosed with stage five Advanced Chronic Renal Disease in 2010.

"I planned to stay in the Navy for 20 years," she said, and become a "lifer" like her father, retired Chief Jesse Brillantes, a Vietnam Veteran who spent 22 years in the Navy.

Brillantes said she became a donor because she knew that if there was any chance to help someone, it would be worth it. "Being a donor means that if you can do it, you want the other person to live," she said.



## KANGOO

#### Continued from 1

fun, unique and healthy the class can be," she explained. Smith said anyone curious about Kangoo can check out the boots at the front desk and go run on the track. "I have seen people who don't like to run put on the boots and run a lot longer," she added.

Smith said Kangoo is especially popular in Europe, and has been catching on in the United States during the past few years.

much because it allows them to really jump and move around without feeling it in their joints, especially their knees and backs. It gives them freedom

and makes it fun," said Smith, adding NSAB

MWR is one of three clubs in the area that offers Kangoo classes. "It may be small now, but it's growing."

With Kangoo's popularity

are praising the effectiveness of the spring-loaded workout.

"It feels great," said Master-At-Arms Seaman Jamisha Watson, an officer with the se-

> curity department. "Kangoo tones my legs, builds mv endurance and is so much fun. I can run

longer and do a little bit more every time I do Kangoo. I would have never thought this would help me stay in shape. I originally came to try the boots

unique workout is a perfect fit for me."

Fitness Center Manager Wendy Tompkins said she is surprised but pleased by the growing popularity of the class, and said the uniqueness of Kangoo has appealed to the various demographics on base and in the Washington D.C. area. "I feel like the boots were a good investment - this class was offered as a way for everybody to engage in a polymeric, rebounding program without impact. I want everyone to give it a chance because every-

thing we do is for our service members, their families and staff to take advantage."

To learn more about Kangoo, contact the fitness center at (301) 295-0031.

## Staff Appreciation Week Calendar of Events

April 16-19

For Staff of Naval Support Activity Bethesda and Walter Reed National Military Medical Center

#### Monday, April 16 **Mindful Monday**

ACTIVITIES: Tai Chi Mindful Movement Relaxation Techniques Zumba Labyrinth Walks Visit with Therapy Dogs

TIME: 11 a.m. Zumba 12 p.m. Mindful Movement 1 p.m. Relaxation Techniques 2 p.m. Tai Chi

LOCATION: Bldg. 9 (Arrowhead Zone)

#### Tuesday, April 17 Spa Day

Kangoo Class Schedule:

Fridays: 5:15 a.m. and noon.

Saturdays: 12:15 p.m.

Tuesdays and Thursdays: 4 p.m.

ACTIVITIES: Chair Massage Hair / Brow Trim Makeover Labyrinth Walks

> TIME: 11 a.m.-1 p.m.

LOCATION: Bldg. 9 (Arrowhead Zone)

#### Wednesday, April 18 **Activity Day**

**ACTIVITIES: Bowling Tournament** Drumming (Labyrinth) Musical Jam Session (BYOI at Labyrinth) Flower Planting (Labyrinth)

TIME: 10:45 a.m.-1 p.m. Bowling 11:30 a.m.-1:30 p.m. Drum Circle 12-1 p.m. Musical Jam

> LOCATION: **Bowling Center (Bldg. 56)**

#### Thursday, April 19 **Luncheon and Finale**

**ACTIVITIES: DUB Show Display** Box Luncheon DI Drawings **Finale** 

TIME: 11 am.-2 p.m.

LOCATION: In front of Bldg. 1 (President Zone)

Receive your tickets for Friday's give-away drawing each time you attend an event!

## MONEY

#### Continued from 3

trading cards, cell phone applications can all be purchased with their own allowance. It might surprise you how frugal your child will become when it's their money being spent and not yours. In addition to helping your child learn how to determine "needs versus wants," it will save you money in the long run, too.

5. Give your kids a concrete reason to save by having them establish and record financial goals. Make sure the goals are easily attainable in a relatively short period of time. These goal-setting skills will help them later on when they are ready to start saving for a car or home rather than a toy.

6. Help your kids open a savings account at your bank or credit union. Kids love to act "grown-up," and this could be the spark that ignites life-long healthy habits. Additionally, when their money is in a savings account, it is not as easily accessible. Encourage your child to categorize their savings into three groups: saving and investing, charitable giving and spending. Recommend that your child deposit at least 10 percent of any money they receive for allowance, gifts, earnings ... into their savings. Another 10 percent can go to the charity/church/community category. The remainder can be set aside for future spending based on your child's financial goals.

Remember, children constantly look to their parents for guidance and direction. If you model good saving behaviors, money management skills and savvy consumer habits, your kids will most likely

do the same!

On behalf of the NSA Bethesda Fleet and Family Support Center's Personal Financial Management team, we want to extend a hearty THANK YOU to all military children, world-wide, for all you do to support your Soldier, Sailor, Airmen or Marine Moms and Dads. If you would like additional financial information or financial counseling, please contact the FFSC Personal Financial Management Team. Financial Counselors Lee Acker, Brian Pampuro or Demetrius Gonzalez may be reached at (301) 319-4087.



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## AWARD

#### Continued from 3

The letter of commendation for Jacobs, a cytology supervisor in WRNMMC's Department of Pathology, cites her "leadership and dedication to the mission of high quality patient care." The letter stated these qualities were instrumental in her helping establish fully integrated cytopathology and molecular diagnostics services within the Joint Operational Area, which had a zero deficiency inspection by the College of American Pathologists last year. She also received praise for her Standard Operating Procedures, and is credited with implementing a new imaging cross training program for cytotechnologists to better and more quickly meet the needs of patients and staff.

Jacobs thanked her "outstanding" colleagues, staff and department for the recognition she received.

Other reminees for JOY included Lt. Charles Baker (Pathology), Lt. j.g. Graeme Bannerman (Traumatic Brain Injury Unit), Lt. Joseph McDonald (Emergency), Lt. j.g. Keith Laffman (Patient Administration), Lt. Cicely Dye (Internal Medicine), Capt. Jeffrey Showalter (Psychology) and Lt. Aron Bowlin (Post Anesthesia Care Unit).

The other nominees for Junior COY were Michael Pember (Base Police), Leyla Beshir (Armed Services Blood Bank), Jamal Winston (Dermatology) and Shanita Goodman (Pharmacy).

Other nominees for Senior COY included Lavondia Alexander (Nursing Service), Katherine Brown (Pain Clinic) and Dr. Tony Panettiere (National Intrepid Center of Excellence).

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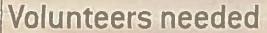
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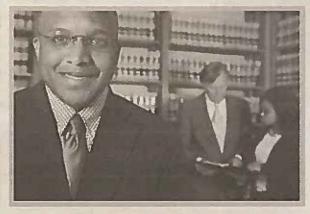
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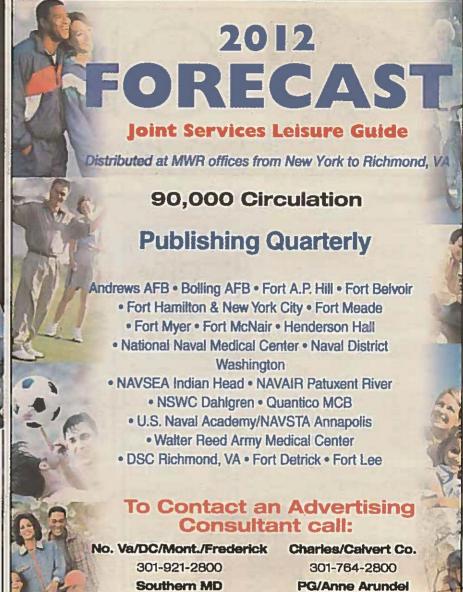
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